STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	155520	A. BUILDING 00 B. WING	02/24/2012

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
BRAUN'S NURSING HOME LLC	909 FIRST AVE EVANSVILLE, IN 47710

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PERCEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F0000	This visit was for a Recertification and State Licensure Survey. Survey Dates: February 21, 22, 23, 24, 2012 Facility Number: 000437 Provider Number: 155520 AIM Number: 100273770 Survey Team: Amy Wininger, RN, TC Diane Hancock, RN (2/21, 2/22, 2/23, 2012) Barb Fowler, RN Vickie Ellis, RN Census Bed Type: NF: 38 SNF/NF: 21 Total: 59 Census Payor Type: Medicare: 4 Medicaid: 49 Other: 6 Total: 59 Sample: 15 This deficiency also reflects state findings cited in accordance with 410 IAC 16.2.	F0000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE TITLE (X6) DATE

Any defiencystatement ending with an asterisk (*) denotes a deficency which the institution may be excused from correcting providing it is determined that other safegaurds provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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	Quality review 2/28/12 by Suzanne Williams, RN			

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F0458 SS=B	483.70(d)(1)(ii) BEDROOMS MEASURE AT LEAST 80 SQ FT/RESIDENT Bedrooms must measure at least 80 square feet per resident in multiple resident bedrooms, and at least 100 square feet in single resident rooms. Based on observation, interview and record review, the facility failed to provide 80 square feet of room space per resident in multiple resident bedrooms, for 9 of 43 resident rooms on 1 of 3 nursing units. (Resident 106,107, 108, 109, 110, 11, 112, 113, 114) (Unit 100). This had the potential to affect 11 of 59 residents currently residing in the facility. Findings include: 1. The following rooms were observed on 02/21/12 at 10:00 A.M. to be set up for one resident: * Resident room 106 2 beds 145.12 square feet 72.56 square feet/resident SNF/NF * Resident room 107 2 beds 145.12 square feet 72.56 square feet/resident SNF/NF * Resident room 108 2 beds 145.12 square feet 72.56 square feet/resident SNF/NF * Resident room 109 2 beds 145.12 square feet 72.56 square feet/resident SNF/NF	F0458	Plan of Correction Response for F458 The rooms identified on CMS form 2567, are located on Unit 100 and do not meet the square footage requirement per Federal and State requirement. When the unit was built, the room size met and/or exceeded the minimum requirement at that time. When the square footage requirement adjusted and the rooms did not meet the requirement, the facility was grandfathered and granted an annual room waiver. The management team currently in place at Braun's Nursing Home has for the time being, made a decision to utilize each resident room on Unit 100 as a private room. Although rooms 111 – 114 were equipped for semi-private residence during the survey, they will be utilized as private rooms when the decision to market them is made. As stated by the surveyor, beds and equipment are stored outside the facility for prompt restructuring to semi-private availability. I respectfully request this waiver be granted in conjunction with the recertification survey conducted February 21, 2012 through February 24, 2012. Margaret	03/14/2012

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	2. The following room was observed on 02/21/12 at 10:05 A.M. to be set up with tables on 02/21/12 at 10:05 A.M. *Resident room 111 2 beds 145.12 square feet 72.56 square feet/resident NF 3. Resident rooms *112, *113, and *114 were observed set up for two residents in each room, when observed on 02/21/12 at 10:05 A.M. * Resident room 112 2 beds 145.12 square feet 72.56 square feet/resident NF * Resident room 113 2 beds 145.12 square feet 72.56 square feet/resident NF * Resident room 114 2 beds 145.12 square feet 72.56 square feet/resident NF During an interview on 2/23/12 at 8:40 A.M., the HFA [Health Facility Administrator] indicated each room was certified for two beds, but some of the beds had been removed and relocated in facility storage and could be quickly set up if needed. The HFA further indicated, at that time, she would like to continue the room waiver. 3.1-19(l)(2)		H. Braun, HFA	